

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 08/09/2012	
NAME OF PROVIDER OR SUPPLIER BETHANY VILLAGE ASSISTED LIVING				STREET ADDRESS, CITY, STATE, ZIP CODE 3530 S SHELBY ST INDIANAPOLIS, IN 46227			
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R0000	<p>This visit was for a State Residential Licensure Survey. This visit included Investigation of Complaint IN00113265.</p> <p>Complaint IN00113265 - Substantiated. No deficiencies related to the allegations are cited.</p> <p>Survey Dates: August 8 and 9, 2012</p> <p>Facility Number: 001121 Provider Number: 001121 AIM Number: N/A</p> <p>Survey Team: Karina Gates BHS TC Beth Walsh RN Courtney Mujic RN (August 8, 2012)</p> <p>Census Bed Type: Residential: 81 Total: 81</p> <p>Census Payor Type: Other: 81 Total: 81</p> <p>Sample: 9</p> <p>These state findings are cited in accordance with 410 IAC 16.2.</p>		R0000				

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 08/30/2012

FORM APPROVED

OMB NO. 0938-0391

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	Quality review 8/13/12 by Suzanne Williams, RN						

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R0144	<p>410 IAC 16.2-5-1.5(a) Sanitation and Safety Standards - Deficiency (a) The facility shall be clean, orderly, and in a state of good repair, both inside and out, and shall provide reasonable comfort for all residents.</p> <p>Based on observation and interview, the facility failed to be kept clean and in a state of good repair. This had the potential to affect 81 of 81 residents in the facility.</p> <p>Findings include:</p> <p>An environmental tour of the facility was conducted with the Maintenance Supervisor and Housekeeping Supervisor/Activity Director on 8/9/12 at 11:10 a.m., with the following observations:</p> <p>During an observation of the first floor telephone room just off of the first floor lounge, brown, caked-on dirt was in all 4 corners of the baseboards. Scuff marks were all over the walls up to 4 feet from the floor.</p> <p>During an observation of Residents #21, 22, and 23's bathroom, space was observed in several areas between the baseboards and the wall. During an interview with the Maintenance Supervisor at 11:22 a.m. on 8/9/12, he indicated he would glue the baseboard</p>	R0144	<p>Corrective action taken by telephone room walls and door being painted. The floor has been stripped and re-waxed. This room will be placed on a preventative maintenance schedule for compliance. The maintenance director will be responsible for monitoring the room for cleanliness and any needed repairs. Maintenance director responsible for identifying any other areas in need of paint and repair throughout the building. This has been completed 08/20/2012. Baseboards noted during observation for residents #21, 22, and 23 have all been glued back onto the bathroom walls. Baseboards near entry to the first floor dining room have also been glued back onto the walls. This has been completed 08/10/2012. Baseboards throughout facility have been put on a preventative maintenance schedule for compliance. The maintenance director will be responsible for monitoring the baseboards for any needed repair work. This has been done 08/17/2012. Corrective action taken by cleaning the floor by the nurses station, Administrator's office, and reception area. Baseboards in these areas also</p>		08/24/2012		

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	<p>back to the wall.</p> <p>The baseboards were coming off the wall in the hallway near the entry to the first floor dining room. The floor by the nurses station, Administrator's office, and reception area was bumpy, severely stained and with dirty baseboards. During an interview with the Maintenance Supervisor on 8/9/12 at 11:30 a.m., he indicated the floor beneath the tile was not cleaned of dirt and debris prior to the tile being installed, hence the bumpy floor. He indicated this took place about 5 years ago.</p> <p>Dirty baseboards were observed in the bathrooms of Residents #11 and 35, and 36. Residents #35 and 36's shared bathroom door was severely scraped on the outside near the door handle.</p> <p>Residents #115 and 116's room had a 4 inch crack in the wall to the left of the heater.</p> <p>The entire second floor hallway carpet was severely stained and dirty. There was a soft ball sized red stain on the carpet near the second floor laundry.</p> <p>A water stain, 1 1/2 square feet in size, was observed above the shower in Resident #57 and 58's bathroom. During</p>		<p>cleaned. Housekeeping staff to monitor and clean daily. This has been done 08/17/2012. The bumpy floor tile on the first floor can only be corrected by removing the floor tile and new flooring being put down. This is scheduled to be done during a major renovation project of the entire building that will begin within the next 60 days. Renovation scheduled to begin by approximately 10/31/2012. Soiled baseboards in resident bathrooms #11, 35, and 36 have all been cleaned. Housekeeping to monitor baseboards for cleanliness and report repair issues to the maintenance director. Scrapes on outside of bathroom door have been corrected by maintenance director painting entire door. All doors have been placed on a preventative maintenance schedule to monitor for compliance. This has been done 08/22/2012. Residents #115 and 116 room wall with crack has been repaired by maintenance director. All resident room walls have been placed on preventative maintenance schedule to be monitored by maintenance director. This has been done 08/22/2012. Second floor hallway carpet has been cleaned. Housekeeping supervisor has placed carpet on cleaning schedule so it is being monitored for cleanliness, this includes regular spot removal and</p>				

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	<p>an interview with the Maintenance Supervisor on 8/9/12 at 11:37 a.m., he indicated it looked like a leak from above.</p> <p>A trail of golf ball sized dark black stains ran down the middle of the third floor hallway in front of Residents #111 and 112's doorway. The entire carpet was stained to a dark brownish black color in front of the 3rd floor elevator leading down the entire east hallway. During an interview with the Housekeeping Supervisor/Activity Director on 8/9/12 at 11:41 a.m., she indicated, "We were told the floors wouldn't stain."</p> <p>The third floor women's restroom was observed with tape completely covering the switch to the fan. One of the ceiling tiles was cracked into two pieces. During an interview with the Maintenance Supervisor on 8/9/12 at 11:44 p.m., he indicated the only way to turn the fan on in the third floor women's restroom was with the taped covered switch.</p>		<p>scheduled deep cleaning shampoo treatments. This has been done 08/15/2012.Red stain on carpet removed by professional cleaning company. This has been done 08/23/2012.New carpet cleaning machine has been ordered by facility. This has been done 08/24/2012.Ceiling tile observed in resident #57 and 58's bathroom has been replaced. No leak found above ceiling tile. All ceiling tile throughout facility has been placed on preventative maintenance schedules to ensure that stained, cracked, etc. tile is replaced as needed. This has been done 08/17/2012.Third floor carpet cleaned, all stains removed. Housekeeping supervisor has placed carpet on cleaning schedule so it is being monitored for cleanliness, this includes regular spot removal and scheduled deep cleaning shampoo treatments. This has been done 08/22/2012.Ceiling tile in third floor women's restroom has been replaced. All ceiling tile throughout facility have been placed on preventative maintenance schedules to ensure that stained, cracked, etc. tile is replaced as needed. This has been done 08/17/2012.Taped covered switch has been removed and fan has been rewired so that it automatically comes on when the light is switched on. This has been done 08/17/2012.Monitoring for</p>				

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				compliance for all cleanliness issues/repairs will also be done by the general manager or whom the general manager designates to make daily rounds. This has been done 08/24/2012.			